

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicant: Clayman et al.) Customer No.: 21378
Serial No: 10/734,697)
Filed: December 12, 2003)
Title: GUIDEWIRE)

)

Date of Electronic Filing: 6-6-06

Dear Sir/Madam:

Attached please find the following documents submitted for filing in reference to the above-referenced application.

1. Power of Attorney to Prosecute Applications Before the USPTO;
2. Statement Under 37 CFR 3.73(b) with Assignment; and
3. Transmittal.

Respectfully submitted,


Rosanne Henehan
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TRANSMITTAL FORM <i>(to be used for all correspondence after initial filing)</i>		Application Number	10/734 697
		Filing Date	December 12, 2003
		First Named Inventor	Ralph V. Clayman
		Art Unit	3731
		Examiner Name	
Total Number of Pages in This Submission	4	Attorney Docket Number	ADIV-1593-AU

ENCLOSURES *(Check all that apply)*

<input type="checkbox"/> Fee Transmittal Form	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> After Allowance communication to Technology Center (TC)
<input type="checkbox"/> Fee Attached	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input type="checkbox"/> Amendment/Reply	<input type="checkbox"/> Petition	<input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> After Final	<input type="checkbox"/> Petition to Convert to a Provisional Application	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Affidavits/declaration(s)	<input checked="" type="checkbox"/> Power of Attorney, Revocation	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Extension of Time Request	<input checked="" type="checkbox"/> Change of Correspondence Address	<input checked="" type="checkbox"/> Other Enclosure(s) (please Identify below):
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Terminal Disclaimer	<input type="checkbox"/> Statement Under 37 CFR 3.73(b)
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Request for Refund	
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> CD, Number of CD(s) _____	
<input type="checkbox"/> Response to Missing Parts/ Incomplete Application	Remarks	
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Cynthia A. Bonner
Signature	<i>Cynthia A Bonner</i>
Date	6/6/06

CERTIFICATE OF TRANSMISSION/MAILING

I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents P O Box 1450 Alexandria VA 22313-1450 on the date shown below.

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This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 hours to complete including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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